10/676,754

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

29290-03

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER SMALL	
TOTAL CLAIMS			20				-	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			20 minus 20=		*0			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			5 minus 3 =		2			X43=	86	OR	X86=	
MU	LTIPLE DEPEN	DENT CLAIM PF	RESENT					+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2						olumn 2	1	TOTAL	471	OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL E	ENTITY	OR	OTHER SMALL	
_	<u> </u>	(Column 1) CLAIMS	- -	HIGH		(Colonia a)	1 1		ADDI-	, i		ADDI-
AMENDMENT A	8, 4.	REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE
	Total	-20	Minus	# 20	0	=		X\$ 9=	-	OR	X\$18=	
	Independent	• 4	Minus	*** 6	<u></u>	=		X43=		OR	X86=	
4	FIRST PRESE	NTATION OF MI	JETIPLE DEF	PENDENT	CLAIM		J	+145=		OR	+290=	
TOTAL ADDIT FEE									-		TOTAL	
											ADDIT. FEE	
		(Column 1) CLAIMS	<u> </u>	(Colui		(Column 3)	י		100	i		ADDI
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* .	Minus	**		=		X\$ 9=.		OR	X\$18=	
	Independent	*	Minus	***		<u> -</u>		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	·	OR	+290=	
TOTAL										OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)											ADDII. 1 EE	
		(Column 1) CLAIMS	1	(COIUI		Column	5.,	 1	4001	1		ADDI-
AMENDMENT C	`	REMAINING AFTER AMENDMENT		NUM PREVI	BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
M	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										.000	
+145= + If the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAL										OR	+290= TOTAL	
-	H the "Highest No	mber Previously Pa	aid For IN TH	S SPACE	is less tha	ın 20, enter "20	o. *	ADDIT. FEE		OR	ADDIT. FEE	L
•	****If the "Highest Number Previously Paid For" (N THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											